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APPLICATION NUMBER FILING OR 371(C) DATE FIRST NAMED APPLICANT ATTY. DOCKET NO./TITLE

10/601,177

06/20/2003

T. Wade Fallin

MLI - 06

CONFIRMATION NO. 6231

POWER OF ATTORNEY NOTICE

Date Mailed: 10/22/2007

180 South 600 West Logan, UT 84321

Daniel F. Justin

NOTICE REGARDING CHANGE OF POWER OF ATTORNEY

This is in response to the Power of Attorney filed 10/11/2007.

• The Power of Attorney to you in this application has been revoked by the assignee who has intervened as provided by 37 CFR 3.71. Future correspondence will be mailed to the new address of record(37 CFR 1.33).

/hchristian/

Office of Initial Patent Examination (571) 272-4000 or 1-800-PTO-9199



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MEDICINELODGE INC. 180 SOUTH 600 WEST LOGAN, UT 84321 06/20/2003

T. Wade Fallin

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CONFIRMATION NO. 6231
POA ACCEPTANCE LETTER

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NOTICE OF ACCEPTANCE OF POWER OF ATTORNEY

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The Power of Attorney in this application is accepted. Correspondence in this application will be mailed to the above address as provided by 37 CFR 1.33.

/hchristian/

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